



# Iowa Department of Human Services

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## INFORMATIONAL LETTER NO.1115

**DATE:** April 5, 2012

**TO:** All Iowa Medicaid Providers Billing Electronically

**ISSUED BY:** Iowa Department of Human Services, Iowa Medicaid Enterprise (IME)

**RE:** Important 5010 and ICD-10 HIPAA Transition Information

**EFFECTIVE:** Upon Receipt

As you are all aware, the electronic transaction formats for health care claims changed on January 1, 2012, from HIPAA version 4010 to version 5010. The Centers for Medicare and Medicaid Services (CMS) announced a “non-enforcement” period that now runs through June 30, 2012, where Medicaid may continue to accept claims in both the old (4010) and new (5010) format, allowing some extra time to transition. **The non-enforcement period will end July 1, 2012. At that point, Medicaid will only be able to accept transactions in the new 5010 format.**

Providers not ready by the deadline should prepare an action plan for compliance and submit the plan to the IME via an email to [imeproviderservices@dhs.state.ia.us](mailto:imeproviderservices@dhs.state.ia.us). The plan should include the projected compliance date, primary point of contact for follow up (name, title, phone number, and email address).

### Total OnBoarding (TOB):

- Direct providers need to obtain a digital certificate for TOB from ABILITY at: [vsitobsupport@abilitynetwork.com](mailto:vsitobsupport@abilitynetwork.com), in order to send the 5010 re-certification test files.
  - The test file needs to contain 10 clean claims in order to be 5010 recertified.
- If a vendor is used for claim submission it is the vendor’s responsibility to test for 5010 on behalf of the provider. Providers are encouraged to maintain communication with the vendor if recertification for the 5010 has not been done.
- Providers who plan to receive the 5010 835 transaction (Electronic Remittance Advice), should log into the TOB and verify that the transaction is setup correctly and set to deliver to the appropriate location.
- Once transactions have been approved for 5010 Production, an email will be sent indicating approval. Please verify that the email address in the TOB profile is accurate.

### Login/5010 Access:

- It is important to remember that the 5010 and 4010 are separate environments and require a unique login and password for each process. Once the 5010 transactions are

moved into a live production status, EDISS will provide the 5010 login credentials via the 5010 Production fax.

- The new 5010 web portal address is:  
<https://ime-ediss5010.noridian.com>.
- If accessing EDISS via the Bulletin Board System, the new production phone line is: 701-277-2355.

**NOTE:** 5010 claims will not process in the 4010 environment.

**Formatting/Billing:**

- A variation of a Post Office Box should not be sent in the Billing Provider Loops (2010BB) or the Secondary Provider Loops. (i.e., P.O Box, PO BX).
- A billing provider address and a service facility address cannot be the same. In this circumstance the service facility loop does not need to be sent.
- If the Billing NPI and Rendering NPI values are the same, the Rendering NPI does not need to be sent.

**5010 Report Translation:**

- 999 and 277CA are the reports issued after the 5010 claim submission. There is no GENRPT/Claim Confirmation Report or 997/ACK in 5010.
  - Both the 999 and 277CA are returned in ANSI X12 formatting and require translation from the billing software vendor in order to simplify interpretation.
    - PC-ACE Pro32 can be used for this translation. If different billing software is used, EDISS recommends that the software vendor be contacted to gain assistance in the translation process.

EDISS is aware that reject reasons of A3:21s are being returned on 277CA reports, and that the reject reasons are not descriptive enough to point to a specific reason why a claim has rejected. EDISS is working to resolve this issue and will send an email notification once updated.

**Top Nine A3:21 Rejections EDISS has Encountered are:**

- The Address Information (N302) is only required when there is a second address line; otherwise, do not send.
- The Address field (2010AA) may not contain the following: "Post Office Box", "P.O. Box", "PO Box", "Lock Box", or "Lock Bin."
- The Last Menstrual Period Date (2300, DTP) is only required when related to the patient's pregnancy; otherwise, do not send.
- The Zip code XXXXX was not found in Code Table ZIP.
- The Admitting Diagnosis (Loop 2300, HI) is required on all inpatient claims.
- The Admission Date Time Qualifier (Loop 2300, DTP02) must be equal to D8, for Medicare claims when the Facility Type Code (Loop 2300, CLM05.01) equals 32, 33, or 34. [Severity: Error]
- The Attending Provider Name (Loop 2310A, NM1) loop is not used for transportation claims.

- The Claim Payment Amounts do not balance for XXXXX. The Sum of Loop 2430 SVD02 amounts, 78 - sum of loop 2320 CAS adjustment amounts, 27 = Loop 2320 AMT Payer Paid amount, 78.
- The Claim Check or Remittance Date (Loop 2330B, DTP) is required when the payer identified in loop 2330B has previously adjudicated the claim and Loop 2430, Line Check or Remittance Date is not used.

#### **Contacting EDISS:**

EDISS can be reached at 800-967-7902, or by email at [support@edissweb.com](mailto:support@edissweb.com).

#### **ICD-10 Implementation for the IME to Continue:**

On February 16, 2012 the United States Department of Health & Human Services (HHS) announced in a press release that it intends to delay the ICD-10 compliance date. The message indicated the delay would be for “certain health care entities” without defining them. As such, **the Iowa Medicaid Enterprise (IME) is continuing to move forward in preparing for the use of the new ICD-10 code set for services provided on and after October 1, 2013**, until more about the delay is announced and understood. When we have more information, the IME will re-evaluate our ICD-10 efforts and offer direction. Until then, we will continue to move forward with our current projects and timelines.

Please make sure you are preparing for ICD-10. CMS has great guidance to consider and review at: <http://www.cms.gov/icd10/>.

If you have any questions not specifically related to electronic transactions, please contact the IME Provider Services Unit, 1-800-338-7909, locally 515-256-4609 or by email at [imeproviderservices@dhs.state.ia.us](mailto:imeproviderservices@dhs.state.ia.us).